FORM 7. APPLICATION FOR SUBDIVISION EXEMPTION PLAT APPROVAL

(To be filed in duplicate)
(Incomplete Applications will not be accepted)

			Date		_
1. Name of Subdivision Exemption			-		
2. Name of Applicant		Phone			-
Address					
(Street No. and Name)	(Post Office)		(State) (Zip Code)	_
3. Name of Local Agent		Phone			-
Address					
(Street No. and Name)	(Post Office)		(State)	(Zip Code)	
4. Owner of Record		Phone			
Address					
(Street No. and Name)				_	
5. Prospective Buyer			_ Phone		
Address (Street No. and Name)	(Post Office)		(State)	(Zin Coda)	
6. Land Surveyor	(1 ost Office)	_ Phone	(State)	(Zip Code)	
Address					
Address (Street No. and Name)	(Post Office)		(State)	(Zip Code)	
7. Attorney			_Phone_		
Address (Street No. and Name)	(Post Office)		(Stota)	(Zip Code)	
8. Subdivision Exemption Location: on the					
•					
Feetof (Direction)		(Street)			
9. Postal Delivery Area	School	District _			
10. Total Acreage Zone	_Number of Lot	s			
11. Tax Map Designation: Section/Townshi	p/Range			Lot(s)	
12.Has the Board of Zoning Appeals graproperty?					
property:					
If so, list Case No. and Name					
13. Is Deed recorded in Torrens Sys	tem: Numb <u>er</u>				
14. Is Deed recorded in General System:	Book		Pa	ge	
15. Current Land Use:					
16. Proposed Use of Each Parcel:					

17. Proposed Water and Sewer Facili	ties:
18. Proposed Public Access to each n	ew parcel:
19. Reason for request of this exemption	on (may use additional pages):
List all contiguous holdings in the san	ne ownership:
Section/Township/Range	Lot(s)
together with the book and page of each Clerk and Recorder. This affidavit shall i property, and the date the Contract of Sal list of all directors, officers, and stockhol of stock must be attached [this need only formation of improvement district(s) or be the contract of the contract	nts to the provisions of Article 8.2 A&B of the Logan
County Subdivision Regulat STATE OF COLORADO	ions.
) SS: COUNTY OF LOGAN	
hereby depoin the papers submitted herewith are true.	se and say that all of the above statements and the statements contained
	(Applicant Signature)
	Mailing Address:

MY COMMISSION EXPIRES:

FOR COUNTY USE

Application Fee: One Hundred (\$100.00) and T	Thirteen (\$13.00) one page OR Twen	ty-
Three (\$23.00) two pages - separate check for i	recording fee.	
Date of Planning Commission:		
Recommendation of Planning Commission:	Approval Denial	
Recommended Conditions of Subdivision Exe	emption:	
	Chairperson, Plann	ing Commission
COUNTY COMMISSIONERS ACTION:		
Conditions of Subdivision Exemption:		
Date Granted:		
Date Denied:		
	Byron H. Pelton	(Aye) (Nay)
	Joseph A. McBride	(Aye) (Nay)
	Jane E. Bauder	(Aye) (Nay)